

Telling the story: National and local SOC evaluation.

Training workshop for new local system of care coordinators.

Betty Walton, Isaac Karikari, and Christine Garry
Indiana University School of Social Work
Indiana Family and Social Services Administration/DMHA

Overview. With foundation and grant funding for behavioral health, social services, and integrated health initiatives come requirements to collect and report data. State and local grantees, partners, and stakeholders can combine such requirements with local quality improvement and evaluation initiatives to tell their story and to manage initiatives. To support local system of care (SOC) coordinators in collecting and using grant and relevant information, basic grant requirements are reviewed in the context of using the information to support decisions, to monitor progress, and to improve outcomes.

Required grant data. SOC grants from the Substance Abuse and Mental Health Administration (SAMHSA) require system and youth-family level data. The IPP (Infrastructure Development, Prevention, and Mental Health Promotion) measures serve as indicators of ongoing activities and efforts toward the building and strengthening of Indiana's SOC. National outcome measures (NOMS) focus on grant related service recipients (Capobianco, Surma, Crawford & Scharf, 2012). In the midst of grant changes, based on local priorities, one Midwestern state retained a few no longer required indicators as valuable determinants of growth and helpful in assessing SOC's capacity for sustainability. One of these indicators, Accountability (A4), serves as a measure of the involvement of youth and families, a core SOC value (Stroul & Friedman, 1986). Currently, local SOC quarterly report the following:

- Policy Development (PD1¹): The number of policy changes completed as a result of the grant.
- Workforce Development (WD2): The number of people in the mental health and related workforce trained in mental health-related practices/activities.
- Workforce Development (WD5): The number of young adult consumers/family members who provide mental health-related services as a result of the grant.
- Partnership/Collaborations (PC1): The number of new memorandums of understanding or agreements (MOU/MOAs).
- Partnership/Collaborations (PC2): The number of organizations collaborating, coordinating, or sharing resources with other organizations as a result of the grant.

¹ PD1, PC1, WD2, WD5, etc. are codes SAMHSA uses for the items we have to report. The numbers, for e.g. the "1" in PC1 shows that the particular information required for this indicator is distinct from other PC indicators. The only reason why you do not see A1, A2, etc. is because we are no longer required by SAMHSA to collect information for those indicators.

- Financing (F3): The Dollar (\$) amount of new braided or blended SOC funding.
- Accountability (A4): The number and percentage of work group, advisory group, or council members who are also young adult consumers or family members.

Conclusion. When jurisdictions receive federal funds, collecting and reporting relevant information helps demonstrate the impact of the funding at local and national levels. The collecting of grant and related information is useful to manage initiatives, identifying areas needing improvement in the provision of mental and behavioral health services for children, youth, and families and monitoring progress. The process helps move toward a culture and routine practice of using data to better manage services and supports for children with behavioral health needs and their families (Bickman & Noser, 1999; Garland et al., 2013; National Research Council, 2006).

References

- Bickman, L., & Noser, K. (1999). Meeting the challenges in the delivery of child and adolescent mental health services in the next millennium: The continuous quality improvement approach. *Applied & Preventive Psychology, 8*(4), 247-255.
- Capobianco, J., Surma, A., Crawford, J. & Scharf, D. (2012). Collecting and using data to improve consumers' health and to meet PBHCl grant requirements. SAMHSA-HRSA Center for Integrated Health Solutions. Retrieved from https://www.integration.samhsa.gov/pbhci-learning-community/11.28.12_Cohort_V_Academy_Part_6.pdf
- Garland, A. F., Haine-Schlagel, R., Brookman-Frazee, L., Baker-Ericzen, M., Trask, E., & Fawley-King, K. (2013). Improving community-based mental health care for children: Translating knowledge into action. *Administration and Policy in Mental Health, 40*(1), 6-22.
- National Research Council. (2006). *Improving the quality of health care for mental and substance-use conditions*. Washington, DC: National Academies Press
- Stroul, B.A., & Friedman, R.M. (1986). A system of care for severely emotionally disturbed children and youth. Washington, DC: Georgetown University Child Development Center, CASSP Technical Assistance Center.

Suggested Citation: Walton, B. A., Karikari, I., & Garry, C. (2017, October). *Telling the story: National and local SOC evaluation*. Training workshop for new local system of care coordinators. Indianapolis, IN: Division of Mental Health and Addiction.



Telling the Story

National & Local SOC Evaluation

Betty Walton, Isaac Karikari & Christine Garry

Indiana University School of Social Work

IN SOC Evaluation Team

Betty Walton, PhD, LCSW, SOC Evaluator, Research Professor
Betty.Walton@fssa.IN.gov; beawalto@iupui.edu

Isaac Karikari, PhD, SOC Research Specialist, Lecturer
Isaac.Karikari@fssa.IN.gov

Christine Garry, MSW, Doctoral Research Assistant
Christine.Garry@fssa.IN.gov



Agenda

- Story Telling
- National SOC Evaluation
- State Evaluation
- Quarterly SOC Evaluation Committee



A word cloud centered around the word "storytelling". The word "storytelling" is the largest and most prominent, written in a dark maroon color. Surrounding it are various other words in different sizes and colors (maroon, orange, black). The words are arranged in a circular pattern around the central word. The words include: "communication", "share", "experience", "word", "writing", "message", "educational", "classical", "honest", "movie", "digital", "fiction", "truth", "legend", "novel", "thoughts", "author", "memory", "history", "myth", "writer", "text", "telling", "answer", "wisdom", "poetry", "question", "past", "story", "education", "gossip", "feedback", "magic", "typewriter", "page", "title", "prose", "connection", "antique", "personality", "dictionary", "university", "personal", "information", "time", "document", "type", "web", "suggestion", "narration", "exchange", "news", "concept", "blog", "literature", "school", "paper", "connect", "true", "read", "idea", "type", "typography", "personal", "information", "time", "document", "type", "web", "suggestion", "narration", "exchange", "news".

storytelling

communication

share

experience

word

writing

message

educational

classical

honest

movie

digital

fiction

truth

legend

novel

thoughts

author

memory

history

myth

writer

text

telling

answer

wisdom

poetry

question

past

story

education

gossip

feedback

magic

typewriter

page

title

prose

connection

antique

personality

dictionary

university

personal

information

time

document

type

web

suggestion

narration

exchange

news

concept

blog

literature

school

paper

connect

true

read

idea

type

typography

personal

information

time

document

type

web

suggestion

narration

exchange

news

Useful Information

1. Use information to plan & to monitor progress
2. What kind of available information is helpful?
3. What kind of information is needed?

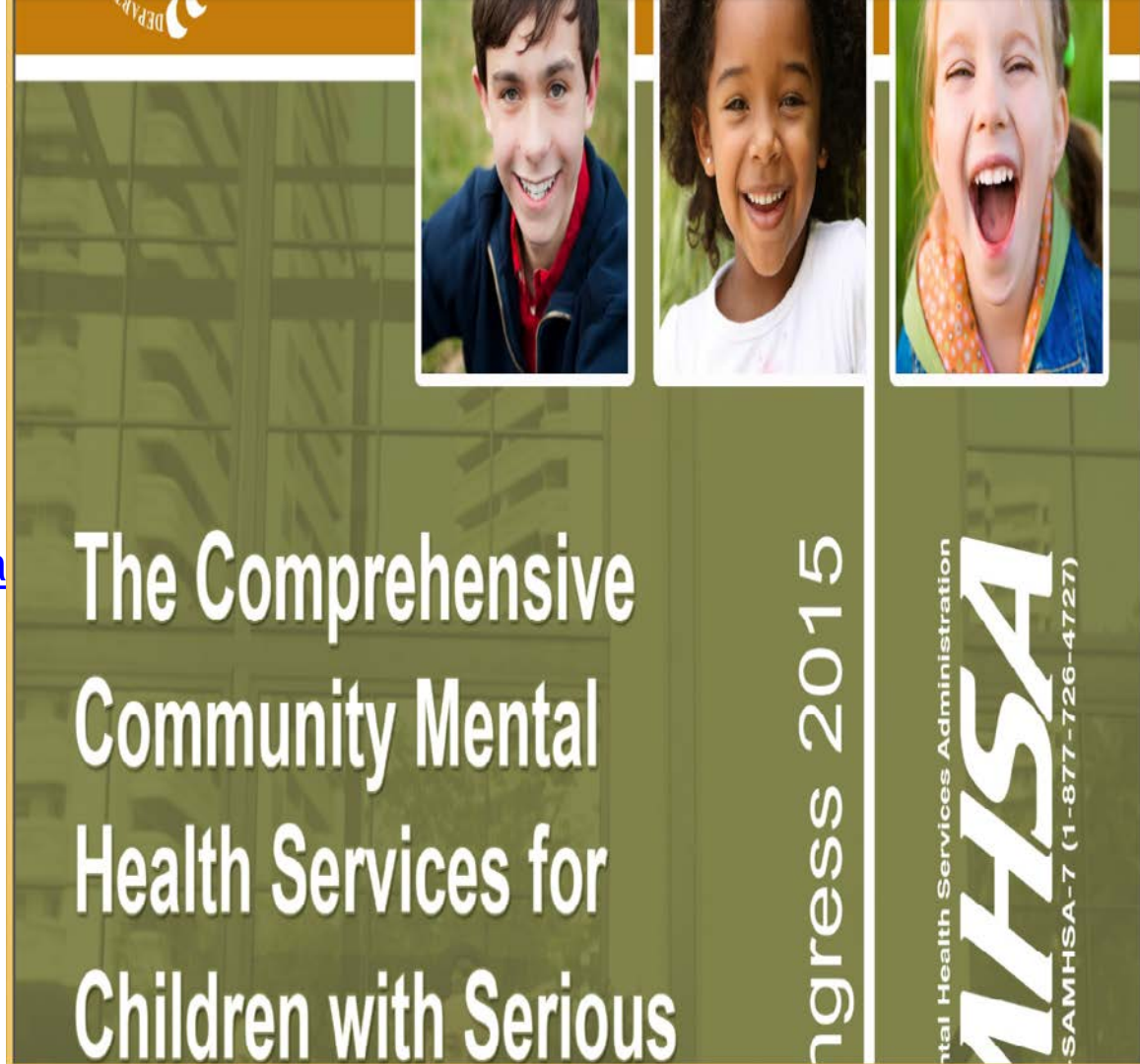


National SOC Evaluation

Telling the Story

Report to Congress

https://www.samhsa.gov/sites/default/files/programs_campaigns/nitt-2015-report-to-congress.pdf





Grant Information

1. Infrastructure, Development, Prevention, and Mental Health Promotion (IPP) Measures

LOC SOC Coordinators report IPP Information quarterly → Qualtrics on-line survey or pdf worksheet

2. National Outcome Measures (NOMS)

Access Site & Wraparound Facilitators report NOMS → TOBI, Child Mental Health Wraparound (CMHW) case management database



Descriptions

IPP Item Review

IPP Measure: Partnership/Collaboration

Measure

PC1. The number of organizations that enter into formal written intra/inter organizational agreements (e.g., MOUs/MOAs) to improve health related practice or activities.



Example

Result Name: MOA between the State University and Community Suicide Hotline

Result Description: This quarter we finalized a formal agreement with the State University. Our suicide hotline refers people to the State University crisis service center.

Number: 1

IPP Measure: Policy Development

Measure

PD1. The number of policy changes as a result of the grant.

Policy is a written document directing an action or event; administrative or legislative in origin.

Examples: directives, guidance, clinical practice guidelines, regulations, statutes, operating manuals, procedures, bylaws, strategic plans, mission statements, written decision, or standards

Report Example

Name: Screening & Early Identification of Mental Health Needs

Description: Local school district and mental health center established new standards for screening and early identification of mental health needs of middle and high school youth.

Number: 1



IPP Measure: Workforce Development

Measure

WD2. The number of people in the mental health and related workforce trained in mental-health related practices/activities that are consistent with goals of the grant.



Example

Trauma-Informed Care

X SOC trained 3 therapists, 3 wraparound facilitators, 1 pediatrician, and 1 RN on how to provide trauma-informed care to youth experiencing mental health problems.

Number: 8

IPP Measure: Workforce Development

Measure

WD5. The number of young adult consumers/family members who provide mental health-related services as a result of the grant.



Examples

Three people with lived experience were hired as certified peer support specialists for three different treatment teams during this quarter.

In January, four parents joined the mentoring program to provide support to families with children experiencing mental health problems.

Number: 7

IPP Measure: Family & Youth Participation

Accountability Measure

A4. The number and percentage of work group, advisory group, or council (consortium) members who are also young adults/family members.

Name of Group

Description. Purpose, total # of participants, # of young adults, # of family members

Numerator/Denominator = %

Report Example

Name: X County Evaluation Committee

Description: A local evaluation committee ensures that evaluation activities are culturally competent, family-driven, & young-adult guided. Community members include youth & family. This quarter the total membership was 10, including 1 young adult and 2 family members.

$3/10 = 33\%$

IPP Measure: Financing

Measure

F3. The amount of pooled, blended, or braided funding used for mental health-related practices or activities.

Example

\$20,000; Pooled funds provided by SOC stakeholders (DCS, ABC community mental health center, and XYZ school system) will be used at the discretion of the local SOC Governance Board to address needs of youth and families in our SOC region.



IPP



- Use the worksheet or Qualtrics survey to collect & report quarterly IPP information
- Use worksheet to collect IPP information from SOC consortium & work groups' members
- Please TYPE submitted reports (no handwritten notes)
- If a total of 25 people wrote their names on a sign-in sheet, please write '25' on the top of that sheet before sending to DMHA.
- When abbreviations are used, define them the first time they are used (e.g., Eleven students attended the ASP (after school program)).

Descriptions

NOMS?

NOMS: Child & Family Information

Population of Concern & Locations

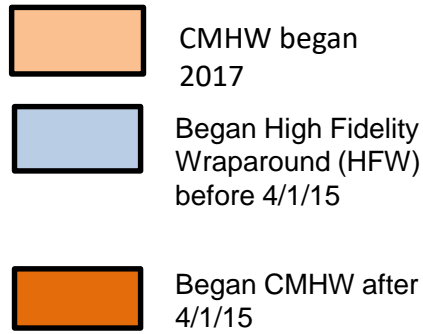
- Children, Youth, & Families participating in Medicaid funded Child Mental Health Wraparound (CMHW) services
- In counties that began 'high fidelity wraparound' after March 2015
- See TOBi NOMs information sheet for details

NOMS information includes:

- Description of youth
- Health
- Substance Use (youth only)
- Satisfaction (every 6 months & at end of services)
- Discharge status (mutual, withdrew, etc.)
- Services provided in last six months

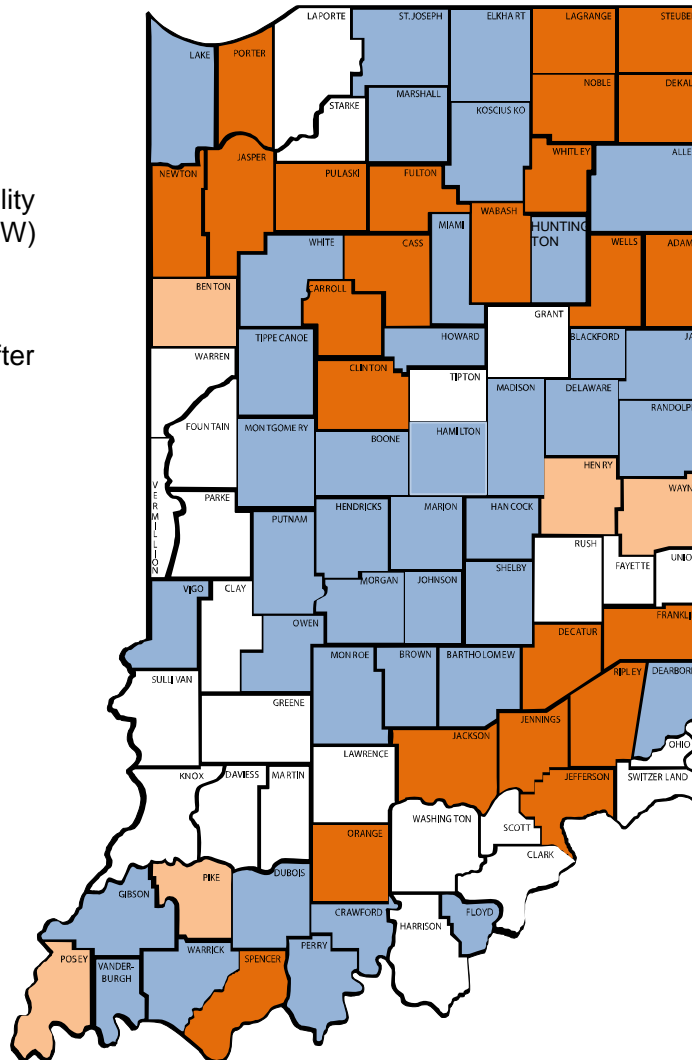
Discussion





SOC Evaluation

Population of Concern: Children & Youth in CMHW



Completing & Reporting NOMs

Completed in TOBi by local Access Site or Wraparound Care Coordinator

- in person or by phone with caregiver or older youth
- within 7 days of program eligibility
- every 6 months
- at end of wraparound services

De-identified information reported to SAMHSA by evaluation team



Access to intensive services: How's it going?

Many local SOC's monitor local referrals to wraparound facilitated services for youth with complex needs...

1. Child Mental Health Wraparound (CMHW – funded by Medicaid)
2. Child Mental Health Initiative (CMHI – funded by DCS)
3. Referred & family decided to go elsewhere

What's on your agenda?



State Evaluation

System of Care Implementation Study (SOCIS)

Describes local & state SOC development from diverse perspectives. To be completed by local respondents (identified by Local SOC Coordinators) who know about local mental and behavioral health services: youth/families, juvenile justice, child welfare, mental health providers, education, residential services, other child service agencies, advocates, physical health providers, and other stakeholders

SOCIS survey available at

http://www.in.gov/fssa/dmha/files/SOCIS_Assessment_Reformat_v6_Final_113.pdf



Useful Information

1. Use information to plan & to monitor progress
2. What kind of available information is helpful?
3. What kind of information is needed?
4. How could we be helpful in the way(s) information is obtained?





Indiana

System of Care

SOC Evaluation Committee

Hear the 'rest of the story'

Join us in-person or by webinar for the quarterly
SOC Evaluation Committee.

Save the Date: March 22, 2018

1:30-3:30 pm